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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration  
Submitted  
with Initial  
Filing

OR

☐ Declaration  
Submitted  
after Initial  
Filing

Attorney Docket Number

71111

First Named Inventor

Linda Gail Bernard

## COMPLETE IF KNOWN

Application Number

Filing Date

08/02/2000

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

POLYAMIDE NANOCOMPOSITES WITH OXYGEN SCAVENGING CAPABILITY

(Title of Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365 (b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States Provisional Application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional Provisional application numbers are listed on a supplemental priority data sheet attached hereto.
60/148,138	08/10/1999	
60/165,064	11/12/1999	

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## DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Rose M. Allen	35,424	Matthew W. Smith	35,366
Michael J. Blake	37,096	Cheryl J. Tubach	38,346
Betty J. Boshears	33,864	Jonathan D. Wood	39,076
Harry J. Gwinnell	29,000		
Karen A. Harding	33,967		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet attached hereto

Direct all correspondence to:

Name	Karen A. Harding						
Address	Eastman Chemical Company						
Address	P.O. Box 511						
City	Kingsport			State	Tennessee		ZIP 37662
Country	USA		Telephone	(423) 229-4016		Fax	(423) 229-1239

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Linda Gail	Bernard

Inventor's Signature \_\_\_\_\_

Date \_\_\_\_\_

Residence: City Kingsport	State Tennessee	Country U.S.A.	Citizenship U.S.A.
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Post Office Address

309 Castaway Drive

City Kingsport	State Tennessee	ZIP 37663-3568	Country U.S.A.
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☒ Additional inventors are being named on the 3 supplemental Inventor(s) sheet(s) attached hereto.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Horst		Clauberg	
Inventor's Signature _____ Date _____			
Residence: City Kingsport	State Tennessee	Country U.S.A.	Citizenship DE
Post Office Address 2601 J B Dennis #210			
City Kingsport	State Tennessee	ZIP 37660-4786	Country U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael John		Cyr	
Inventor's Signature _____ Date _____			
Residence: City Kingsport	State Tennessee	Country U.S.A.	Citizenship U.S.A.
Post Office Address 204 Coralwood Drive			
City Kingsport	State Tennessee	ZIP 37663-2712	Country U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
John Walker		Gilmer	
Inventor's Signature _____ Date _____			
Residence: City Kingsport	State Tennessee	Country U.S.A.	Citizenship U.S.A.
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City Kingsport	State Tennessee	ZIP 37660-4754	Country U.S.A.

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
James Christopher		Matayabas, Jr.	
Inventor's Signature _____ Date _____			
Residence: City	State	Country	Citizenship
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City	State	ZIP	Country
Chandler	Arizona	85224-7216	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jeffrey Todd		Owens	
Inventor's Signature _____ Date _____			
Residence: City	State	Country	Citizenship
Kingsport	Tennessee	U.S.A.	U.S.A.
Post Office Address			
117 Willowbrook Drive			
City	State	ZIP	Country
Kingsport	Tennessee	37660-7581	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Mark Edward		Stewart	
Inventor's Signature _____ Date _____			
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City	State	ZIP	Country
Kingsport	Tennessee	37664	U.S.A.

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Sam Richard		Turner	
Inventor's Signature _____ Date _____			
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1037 Sussex Drive			
City	State	ZIP	Country
Kingsport	Tennessee	37660-5836	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Shriram		Bagrodia	
Inventor's Signature _____ Date _____			
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2649 Suffolk Street			
City	State	ZIP	Country
Kingsport	Tennessee	37660-5803	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature _____ Date _____			
Residence: City	State	Country	Citizenship
Post Office Address			
City	State	ZIP	Country